MEDICAL JURISPRUDENCE AND TOXICOLOGY.

58. *Monomania.*—The case of *Greenwood's Will* is one of the earliest ever discussed in the English Courts, with reference to the subject of partial insanity or monomania. It was tried before Lord Kenyon and a special jury on the 13th of May, 1790, but up to last year, we have no detailed account of the evidence adduced.

Lord Erskine, in his celebrated speech for Hadfield, referred to it in the following terms:

"In the very recent instance of Mr. Greenwood (which must be fresh in his lordship's recollection), the rule in civil cases was considered to be settled. That gentleman, whilst insane, took up an idea that a most affectionate brother had administered poison to him. Indeed it was the prominent feature of his insanity. In a few months he recovered his senses. He returned to his profession as an advocate, was sound and eminent in his practice, and in all respects a most intelligent and useful member of society, but he could never dislodge from his mind the morbid delusion which disturbed it, and under the pressure, no doubt, of that diseased prepossession, he disinherited his brother. The cause to avoid this will was tried here. We are not now upon the evidence, but upon the principle adopted as the law. The noble and learned Judge who presides upon this trial and who presided upon that, told the Jury, that if they believed Mr. Greenwood, when he made the will, to have been *insane*, the will could not be supported, whether it had disinherited his brother or not; that the act, no doubt, strongly confirmed the existence of the false idea, which, if believed by the jury to amount to *madness*, would equally have affected his testament, if the brother, instead of being disinherited, had been in his grave, and that on the other hand, if the unfounded notion did not amount to madness, its influence could not vacate the devise."

After more than fifty years, Dr. Curties, in an appendix to the third volume of his Ecclesiastical Reports, has published the charge of Lord Kenyon in this leading case, from the short-hand notes of Mr. Gurney.

It appears, that previous to this trial, William Greenwood, the disinherited brother, had brought an ejectment in the Court of Common Pleas, and obtained a verdict against the will. The defendant (a cousin) in that action was then in America, but hearing of the verdict, immediately returned to England, and commenced the present action. Mr. Erskine was engaged in his favour and Sergeant Adair for the brother.

The charge of Lord Kenyon is elaborate and minute, and contains a full analysis of the testimony. I shall not attempt beyond a brief statement of it.

After adverting to the caprice which is often shown in the disposition of property, but yet without any suspicion of the sound state of mind of the testators, he observes that there was a possible fallacy in the statement of the question by the learned Sergeant.

"He stated that the question was, whether the disposition was the effect of madness or of sound mind. I am rather inclined to believe that some persons in judging of it, would look first to the act done, and argue up from that to the sanity or insanity of the mind, instead of looking at that which is the real question, and which the law ever considers to be the question, namely, whether *the testator was of sound and disposing mind and understanding when he made his will?* This is *the* question which the wisdom of ages has framed, and which as often as the question arises in Courts of Justice, and is put into form, in those words, it is put into form."

In favour of the sanity of the testator, was adduced the testimony of a number of respectable and intelligent persons, who had known Mr. Greenwood from the time of leaving school and going to college—during his study of the profession of the law, and subsequently in family intercourse, and in business affairs. They all agree, that there was no appearance of derangement of mind, either in conduct or behaviour. Several, however, remarked that the brothers, although they lived together, appeared to hold no communication with each other, there was no conversation between "them, when they sat together at dinner."

Dr. Reynolds, a physician, stated that in November, 1787, Mr. Greenwood consulted him on his illness, which was a consumptive case; there was no appearance of derangement of the intellect; he conversed as a sane man, and described his disorder with accuracy.

Mr. Greenwood's friends pressed him to go to Lisbon for the recovery of his health. He replied that he could not, until he had settled his affairs. When his brother was suggested as an agent, he said, in a determined way, "he shall have nothing to do with my affairs." He appointed an agent, drew up instructions, marked with great accuracy and good sense, and after this departed for London. While there, on the 7th of December, he drew up and executed his will. The friend who gives this testimony, adds, that he received a letter, dated Lisbon, January 10, giving a long, accurate and sensible account. He also had, however, observed other instances of marked dislike to his brother—such as, if Mr. Greenwood wanted to be helped to a dish at table that stood near his brother, he had the dish removed to him, rather than ask his brother to help him.

The great majority of the witnesses, however, having met him in the ordinary intercourse of conversation and business, united in pronouncing Mr. Greenwood, a man of sound mind and understanding, and perfectly competent to dispose of property.

The first witness called on the part of the defendant was Mr. Hingerston, the apothecary. He deposes that on the day after his father's death, he was sent for to Mr. John Greenwood—who was extremely feverish—this continued for several days, and was finally accompanied with delirium. The patient was restless and suspicious, made complaints to him of his brother and servant, and hinted that there were plots against him. This was on the 25th of April—and that he attended him until the 23d of June—that he never was free from delirium, as long as he attended him. Coercion was thought necessary, and a keeper was employed from the Horton establishment, who remained ten weeks, and did not consider him in his right mind. He thought him not quite well when he left, though much better—noticed violent paroxysms of passion in consequence of the detection of an untruth.

Dr. Pitcairn was called at the instance of Mr. Jones. Mr. Greenwood was ill, and unmanageable on the 26th of April. "He thought no one could look at him without perceiving that he was in an insane state." Dr. Budd prescribed for him, and concurred in the belief of his insanity. He was very shy, particularly when his brother was present.

Mr. Livie, an old friend of the family, states that on the death of the father, all were in great distress. Mr. Greenwood was ill the next day, and some days after, he sent for his brother and witness; expressed his apprehensions of immediate death, and said that, if this should happen, his whole property would go to his brother and sister. Mr. Livie soon thought that a keeper was necessary—but saw very little of him, until Price was removed. He met him some time after, put out his hand, but Greenwood would not shake hands, and ever afterwards, when he passed, would not bow or speak to him.

The Rev. Mr. Jones was the tutor of Mr. Greenwood at Trinity College, Cambridge. Mr. Greenwood having escaped out of the window, came to him on the 5th of May, 1786. He found him dressed in deep mourning, very pale, in great distress, said he had lost the best of fathers, that his friends had deserted him, the Higginsons; Livie and his brother, too, had deserted him and had spread a villainous report of him, that he had been undutiful to his father, and been accessory to his father's death, and that they had confined him. He urged him to accompany him to London, which he did. He was low and melancholy, and Mr. Jones did not think he was in his right mind.

On the 20th of June Mr. Jones again saw him; he was still low and melancholy, but not so bad as before. He appeared to have a great dislike of his brother. In December, 1786, he appeared to have recovered his senses. The witness then talked with him about his brother. The deceased said he would convince him that his brother had not done right; and he called him a hound, a scoundrel, and a villain.

Mr. Jones saw Mr. Greenwood again on the 4th of June, when he noticed, for the first time, that the deceased had taken a dislike to himself; talked of friendship being only a name, and of being deserted; and at a subsequent interview in July, 1787, burst into a violent rage; accused him of calling in Dr. Budd, and of retaining Price. He left him, refusing to give his hand.

To another witness, a college acquaintance, he stated, in July, 1787, that his brother had been the author of the "force used to him. He also charged his brother with having accused him of not feeling for his father. He further said that they had given him brandy and water, in which they had put poison; and that they had put arsenic into his tea-kettle; that he asked the witness whether he would not have him prosecute his brother; that he would certainly prosecute his brother." This witness also proved his constant sullenness and unkindness to both brother and sister. He promised to alter this, but very shortly after returned to his former habit.

Other witnesses proved that this feeling was entertained even after his arrival at Lisbon.

Lord Kenyon concluded his charge as follows: "The inquiry, and the sole inquiry, in this cause is, whether he was of sound and disposing mind and memory at the time when he made his will. However deranged he might be before, if he had recovered his reason at the time, he was competent to make his will.

"And I take it, a mind and memory competent to dispose of his property, when it is a little explained, may stand thus: having that recollection about him that would enable him to look about the property he had to dispose of, and the persons to whom he wished to dispose of it. If he had a power of summoning up his mind so as to know what his property was, and who those persons were that then were the objects of his bounty, then he was competent to make his will.

"The conduct which he held to his brother was certainly considerably unaccountable. If, whenever his brother's name occurred, instantly a fit of delirium had seized him, then I should conceive that he was not competent to make his will; but if his mind remained entire—if he had new raised up prejudices against his brother, though upon improper grounds, yet if they were such prejudices as might reside in a sound mind, it is hard that those prejudices should lead to conclusions unfavourable to his brother; but hard as the case may be, it is better that a thousand hard cases should take place than that we should remove the landmarks by which man's property is to be decided.

"It is for you to look at that conduct to his brother to see whether it is evidence of a derangement of mind, or whether only an unreasonable prejudice which he indulged against his brother; if it be the last, that did not unfit him to make his last will and testament.

"A multitude of instances there have been, where men have taken up prejudices against their nearest and dearest relations; it is the history of every week in the year, and the history of almost every family at one time or other—that harsh dispositions have been made—that unreasonable prejudices have taken place—that one child, standing equally near in blood, has been preferred to another; and if once we get into digressions of that kind, then we get upon a sea without a rudder. Where will you stop? what partiality will be enough to set aside a will? and what partiality will you give way to, and say the will is good? These are questions which the most correct and acute mind that ever addressed himself to the consideration of questions, will not be able to settle.

"Your are to consider whether his mind was entire to make the disposition; not whether the disposition was whimsical, cruel; what none of you, retiring to your own bosoms, and collecting your own feelings, would have made; but to see whether it was the disposition of this man's mind, exercising the faculties of his mind, when in possession of those faculties.

"If you think that, whenever that topic occurred to him, it totally deranged his mind, and prevented him from judging of whom the objects of his bounty should be, according to his own will, then the will cannot stand, and then you will find for the defendant; but if you think he was of competent mind to make his will, to exercise his judgment, however that might be disturbed by passions which ought not to be encouraged, then the will ought to stand. It is for you to decide; and the care and attention you have paid have made it unnecessary for me to say so much as I have said, in addition to the evidence." Verdict for the plaintiff.

The reader will observe that an opposite verdict had been obtained for the defendant in the Common Pleas. In consequence of this, Judge Cooper (Medical Jurisprudence, p. 396) says that a compromise took place. T. R. B.

59. *Poisoning with Oxalic Acid.*—The following case, by Dr. LETHEBY, presents some peculiarities. An unmarried female, aged twenty-two, had a quarrel with her lover, and in a fit of jealousy, after he had left her, took oxalic acid, and the next morning was found dead in her room. Mr. Garrat made an examination of the body, removing the stomach and its contents, although he had great difficulty in so doing, from the corroded and softened condition of that organ.

He brought them to Dr. Letheby for examination. The stomach was very much blanched, except in two or three places where there were small black spots, as if blood had been effused and acted upon by the poison, and here and there a blood-vessel might be seen ramifying, with its contents similarly blackened. The tissue of the stomach was so softened and disorganized, that it could scarcely be handled without tearing; indeed, at the cardiac end, it was reduced to a pulpy or gelatinous consistence, and had, in consequence, numerous perforations.

The contents of the stomach were about six ounces in quantity; the fluid was of a dark colour, like porter, and contained very little solid matter; it was strongly acid, and on being tested, was found to contain about three drachms of oxalic acid.

Dr. Letheby remarks that it has been doubted by some authorities, whether oxalic acid has any corrosive action on the stomach. "Dr. Christison mentions only one case, in which he found the stomach perforated after its exhibition; and Mr. Taylor remarks, that in his experiments on animals, and from some few observations on the human subject, he has found nothing to bear out the view that perforation is a common effect of the action of this poison." The present case, however, is sufficient to show that softening and perforation may take place.—*London Medical Gazette*, Oct., 1844.

Dr. Letheby might probably have added, with truth, that the unrestrained operation of this powerful poison aided in inducing the result. Deverjie states expressly, that oxalic acid, when concentrated, caused in animals a softening and a gelatinous condition of the stomach. T. R. B.

60. *Poisoning with Mortar or Quicklime.*—A boy, three years of age, playing in a garden, where builders were at work, tasted some slacked-lime, and finding it sweet, he ate a considerable quantity. The parents observed him, and having taken a quantity of lime from his mouth and nose, sent for medical assistance. An emetic of Ipecac. was ordered, and after large doses, he vomited up a mass of gray stuff, like mortar. Almond emulsion was then ordered. The night was restless; the child feverish; drank frequently and refused food; the lips were of a chalky whiteness; the mouth showed several blisters; the belly was hot, and painful on pressure, and the alvine evacuations were bloody. A few leeches were now applied to the abdomen and eventually the child got well.—Dr. LION in *Caspar's Wochenschrift.—Ibid.* T. R. B.

61. *Poisoning with Radix Sambuci.* (Dr. Schollmeyer, *Medicinische Zeitung.*) —A weakly woman, 54 years old, who had been sick all day, and thrown up a quantity of greenish stuff, which she regarded as bile, was persuaded by her husband to take two tablespoonfuls of the juice of the fresh elder-root, which he himself had dug up, shaved down and pressed. The woman complained of severe pain in the abdomen. An infusion of senna was ordered, but she did not take it, as the bowels began almost immediately to act copiously. Next day, the symptoms were those of enteritis; paralysis of the lungs followed, and the patient died. The body was not opened.—*Ibid.* T. R. B.

62. *Acetate of Iron as a Remedy for Arsenical Preparations.*—According to the experiments of Duflos, the hydrated peroxide of iron, although of admitted efficacy in cases of poisoning with uncombined arsenious or arsenic acid, is wholly ineffectual when these acids are combined with bases, as for example, Fowler's solution, or arsenite of potash, or arseniate of potash, which last is frequently employed in calico-printing and is consequently easily procured.

In the uncertainty in which the practitioner may thus be placed, as to whether the arsenical poison be free or uncombined, it is very important to administer the oxide of iron in such a form as to produce a favourable result, and to this end, the peracetate of iron is advised. It may be prepared by adding to the hydrated peroxide of iron, three parts of acetic acid of density 1·06, and sufficient water to make up sixteen parts.

This liquid, which is a solution of peracetate of iron with excess of base, precipitates arsenious and arsenic acids from all their solutions, either free or combined with any base; 500 grains of it are sufficient to decompose 1880 grains of Fowler's solution. Its power is more rapid in proportion as it is more diluted with water, besides which, large dilution prevents all irritating action of the acetic acid set free.—*London, Edinburgh and Dublin Philosoph. Magazine*, Dec. 1844, *from Journal de Chimie Medicale.* T. R. B.

63. *Report on the Physiological Actions of Medicines.*—At the last meeting of the British Association, Dr. J. Blake endeavoured to prove and illustrate the law, suggested in a former report, by additional experiments, viz: "That isomorphous substances, when introduced directly into the blood, exert an analogous influence on the animal economy." The substances experimented with were the tartrate of antimony, which (when injected into the veins), produced exactly the same phenomena as did the arsenic or phosphoric acid, as detailed in former reports; the salts of palladium and platinum, the action of which was identical. The last series of isomorphous substances was the well-defined group, the chloric, hydrochloric, bromic and iodic acids, the effects of which were closely analogous, viz: the arrest of the circulation in the lungs, the animal dying from congestion and serous effusion in the respiratory organs. When the injection was into the venous system and when into the arteries, the circulation was irregularly depressed and elevated at intervals. From the evidence of former groups of experiments, united with those detailed in this report, the author deems the law referred to proved, and the conclusion warranted, that the molecular reactions that take place between the elements of living beings and inorganic bodies, are to a great extent independent of chemical affinity, but connected with those properties of matter expressed by its isomorphous relations, or by its physical polarity.—*Athenæum*, Oct. 26th, 1844.

Surely this explanation is too *physical.* T. R. B.

64. *Appearances on Dissection in a case of Suicidal Suspension.* By Campbell De Morgan. (Middlesex Hospital.)—A female, aged fifty, with a grown-up family, had suffered for more than a twelvemonth from a cancerous affection of the uterus, which had caused constant and intense pain. She had been relieved greatly by proper medical treatment, until about four days before her death, when her agonies were again intense. She was at the same time, so weak, that she made no movement without assistance, and then only with great pain

and difficulty; at half-past six P. M., she begged those about her to go for a time into an adjoining room, as she said she felt disposed to sleep. Her husband went into the room a little before seven, and she was then quiet, suffering much, but still desiring to be alone. He left her and remained in the next room with the family; no noise whatever was heard. About half an hour after, her husband again went to the room and found her hanging from the bed-rail quite lifeless; this rail was at the side of the upper end of the bed, and about five feet eight inches from the ground; the front of her body was turned round towards the bed, the head thrown forcibly back, the knot being placed on the middle of the under side of the chin. An old silk handkerchief had served for a cord. She had been in the habit of using it to shift her position, one end being fastened to the bed, while she raised herself by pulling on the other; it had become by frequent use in this way, nearly as round and contracted as a thin rope. Between the point of suspension and the knot, there was about four inches distance, and her height was five feet one inch, so that there was not more than three inches space between her heel and the ground. The knees must have been on a level with the bed-frame and resting against it. A low chair stood near the body, but neither that nor any other piece of furniture was upset or disturbed. Mr. Lonsdale saw the body an hour after it was cut down. The features were perfectly calm and there was no trace of congestion about the face.

Two days after, Messrs. De Morgan and Lonsdale examined the body. Decomposition had commenced, but there was very little cadaverous lividity of the depending parts of the body. The face was pale, the ears natural, the eyes neither injected nor prominent; the tongue was pale, lying far within the teeth and without any mark of indentation. The cord-mark was well defined and like parchment, dry, brown and hard. At the upper edge of the groove, on the right side, was a thin line of congestion. This appearance was absent on the lower edge of this side, and it did not exist at all on the left side; there was no ecchymosis under the groove. The direction of the cord-mark was remarkable. It was very deep at the posterior part of the neck, just over the atlas, and extended in a direction from above *downwards* and forwards on each side, to the posterior edges of the sterno-mastoid muscles, a little below the angle of the jaw; anterior to this, there was no mark whatever, excepting one broad, hard patch, just under the chin, where the knot had made its impression.

The uterus was found greatly diseased—the stomach healthy, as also the lungs, without congestion, and the heart was also natural in appearance, and as to quantity of blood.

There were thus no proofs that dyspnœa or cerebral congestion had been the cause of death. But it seemed probable that the spinal marrow was injured, and such was found to be the fact. Ecchymosis about the deep muscles, over the second and third cervical vertebræ, and on removing the first five vertebræ and opening the canal, ecchymosis was found in the sheath of the spinal marrow, at a part corresponding to the external injuries. At the left side and exterior to the sheath, was an extensive effusion of blood, firmly coagulated. The odontoid process was firmly retained in its place, none of its ligaments having given way, nor were there any marks of fracture of the vertebræ, nor of laceration of their ligaments, but there was an unusual degree of mobility between the third and fourth vertebræ, as though the ligaments had been stretched.

This is quite an interesting case. The great weakness of the female—the body not being heavy, and the fall, if any, very trifling, all show that but little exertion could have been employed. But the peculiar position and direction of the cord, which were such that the force employed must have operated in bending the head, and the two upper vertebræ abruptly backwards, will explain the cause of this effect on the spine. The only instance (says Mr. De Morgan) of which he is aware, whose death was supposed to have been caused by the forcible bending of the head backwards, is mentioned by Deverjie, vol. ii. p. 477, 2d edition. In this case, however, the body was not opened, and both

Esquirol and Deverjie doubt the truth of the explanation offered of the cause of the absence of all external signs of death by dyspnœa, viz: the luxation of the cervical vertebræ. The present case, however, renders that explanation more probable. It shows, moreover, that an injury may be done to the neck in hanging, sufficient to interfere with the functions of the spinal marrow, but without the occurrence of rupture of the ligaments or processes.—*Lancet*, Aug. 10, 1844.
T. R. B.

65. *Strangulation by Machinery.*—On Monday, (Jan. 16, 1845,) Mr. Baker held an inquest on the body of William Laurence, aged 18, employed by Mr. Martin, paper glazer and embosser. On the previous Friday evening, deceased was about to glaze some paper at a one horse power steam engine, and was passing a proof sheet between its rollers, one of which is of hollowed brass, heated by a red hot round bar of iron, in the manner of a tea urn. He wore at the time, a neckerchief, tied sailor like, with the ends depending loosely and long. The sheet of paper he was trying, missing its bite, slipped, and as he stooped to catch it, the ends of his neckcloth got beneath the brass roller, and he was drawn in with his neck and side face tightly fixed against it. He cried out "stop the engine," and two fellow workmen, hearing the appeal he made, hurried to his assistance and did so. They then unscrewed the rollers, and extricated deceased. He sighed heavily, once or twice, and expired. Mr. Matcher, a neighbouring surgeon, pronounced the cause of death to be strangulation, and accounted for its suddenness through the close contact of the deceased's visage with the heated roller. Had it been cool, since he was so expeditiously extricated, he might not have been strangled. Verdict, "Accidental Death."—*London Illustrated News*, January, 1845. T. R. B.

66. *Death from Tartaric Acid.*—The same journal states that on the 7th of Jan., Mr. Walkley held an inquest on the body of William Watts, a cab driver. The evidence went to prove that the deceased went into the shop of Mr. Watkins, druggist, and asked for two ounces of Epsom salts, but by mistake, Mr. Watkins, junior, gave him Tartaric Acid, from the effects of which he died some days afterwards. The jury returned a verdict of manslaughter against Mr. Watkins, jr., and he was conveyed to gaol.

If the above account be correct, it is probably the first case that has occurred of poisoning by Tartaric Acid. Drs. Christison and Coindet administered large doses (*Edinb. Med. and Surg. Journal*, vol. 19,) to animals without any injurious effects. T. R. B.

67. *Feigned Diseases in Egypt.*—"The dread of conscription is painfully illustrated by the number of maimed you meet everywhere. At least two-thirds of the male population of Egypt have deprived themselves of the right eye, or of the forefinger of the right hand. There are even professional persons, who go about to poison the eye, which they do with verdigris, or sew it up altogether. Our equipment consisted of twelve men; of these only ten were liable to conscription, and seven of them were either one-eyed or fore-fingerless."—*Warburton's Crescent and the Cross.* T. R. B.

68. *Poison of Snakes in Australia.*—"The poison of the generality of Australian snakes appears to act differently from that of the rattlesnake of America, or the viper of England; for whereas the poison of the latter species creates immediately a marked effect on the punctured wound, causing violent swelling, intense pain, and a yellow or livid hue over the surface, the bite of Australian snakes does not cause much pain or inflammation in the wound itself, but seems principally to affect the whole nervous system, rapidly causing the patient to fall into a comatose state. In this respect, the poison resembles that of the asp of Egypt."—HODGKINSON'S *Australia.* T. R. B.

MEDICAL STATISTICS.

69. *On the Mortality at Different Ages in Certain Diseases.* By ALEX. WATT, LL.D.—IN a paper which was published in the proceedings of the Glasgow Philosophical Society last year, I showed, from the returns obtained from different towns in England and Scotland, that the amount of deaths by various diseases is nearly identical at the same ages, and that whatever the total amount of deaths by each disease may be, the proportion which the deaths falling at certain periods of life bears to the whole deaths by these respective diseases remains the same. The examples given in that paper related to fever, measles, small-pox and bowel complaints. As the law which was deduced from these examples appeared to be of great interest, it became an important point to determine whether it was of more general application, since a knowledge of the specific laws of mortality by each disease at different ages, by determining more clearly the nature and operation of the disease, may be expected to lead both to improved modes of medical treatment, and to facilitate the introduction of such sanatary regulations as would insure to the inhabitants of our cities one of the most important of social blessings—a healthy population. Through the kindness of William Mills, Esq., formerly lord provost of Glasgow, I have been enabled to compare my former tables with data which I have calculated from the mortality bills of New York and Philadelphia. From such comparative results we are enabled to distinguish, at a glance, the modifications which diseases undergo in different climates. One of the most interesting diseases is typhus, on account of its frequent occurrence in this country, and more especially in Glasgow, where it seems to serve as a test of destitution.

Fever.—In the bills of mortality for New York and Philadelphia, the mortality by the different species of fever being judiciously given separately, we are enabled to select the species corresponding with those registered under the head of fever in the Scottish towns. The following table exhibits the comparative mortality from fever in Edinburgh and Glasgow, and from fevers, exclusive of puerperal and scarlet fevers, in New York and Philadelphia:—

	Edinb.	Glasg.	N. York	Philad.	Mach.
	p. ct.	p. ct.	p. ct.	p. ct.	p. ct.
Deaths under 5 years to the whole deaths by fever,	12.41	12.07	15.67	17.34	16.08
Ditto, under 20 years,	29.74	29.05	30.22	33.03	38.48
Ditto, 20 and upwards,	70.25	70.94	69.77	66.96	61.51

In the above table the per centage for New York was deduced from 1416 cases, and that of Philadelphia from 663 cases. The greatest difference appears to be at the lowest ages, where the mortality in America is higher. Similar results frequently occur in this country when the disease is less prevalent, as in 1842, in Glasgow, when the mortality under 5 years was 18.58. During that year it is well known that there was a smaller proportion of deaths by typhus than usual.

Measles.—The following table affords an extended illustration of the same law, which was pointed out in the last paper published in the "Proceedings," and shows that the number who die of measles is nearly the same at the same ages in different towns:—

	Glasgow.	Edinburgh.	N. York.	Philad.
Under 2 years,	52.76	60.25	47.48	45.76
" 5 "	88.08	92.30	90.09	89.83
" 20 "	99.35	99.67	98.27	99.43
Above 20 "	0.64	0.42	1.72	0.56

The total amount of deaths in each of these towns was very different, and yet it will be observed that the proportion of deaths, at the different ages, to the whole deaths by measles are very nearly the same in each of these towns, the variation being chiefly at ages under two years.

Scarlet Fever.—The following table exhibits the per centage proportionate amount of deaths by scarlet fever, at different ages, in various towns, to the whole deaths by that disease in each town respectively:—

	Glasgow.	N. York.	Philadelphia.
Under 2 years, - - - - - - - - - - -	35.40	30.12	40.69
" 5 " - - - - - - - - - - -	70.15	76.75	75.49
" 20 " - - - - - - - - - - -	97.95	97.39	97.77
Above 20 " - - - - - - - - - - -	2.04	2.60	2.22

Similar examples to the above are given for other towns of England and Scotland in the volume of the "British Association Transactions" for 1842, and from them it appears that the same law is applicable in all the localities examined. That the proportions of deaths by scarlet fever, at the different ages, to the whole deaths, should be so nearly the same in New York and Philadelphia is remarkable, and although the amount for the lower ages differs from Glasgow, there is, no doubt, sufficient reason for this variation.

Small-Pox.—In this table we have compared the proportionate amount of deaths by small-pox, per cent., at different ages, in various towns, to the whole deaths by that disease in each town respectively:—

	Glasgow.	Edinburgh.	N. York.	Philadelphia.
Under 2 years, - - - - - - -	57.76	53.24	34.11	34.39
" 5 " - - - - - - -	85.72	82.68	58.66	57.14
" 20 " - - - - - - -	95.12	95.23	72.74	77.24
Above 20 " - - - - - - -	4.87	4.76	27.25	22.75

From this table it appears that the proportion of deaths by small-pox to the whole amount of deaths by that disease in New York and Philadelphia, at the same ages, is very different from the proportion of deaths by the same disease in the towns of this country, the proportions under two years of age being above 23 per cent. less in New York and Philadelphia than in Glasgow. There is, of course, a corresponding increase in the proportion of deaths at the higher ages; yet it must be observed that the proportion of deaths by this disease at the early ages is the same in Philadelphia as it is at New York, affording another strong proof that there are physical laws which regulate the amount of deaths at different ages by the various diseases, when unimpeded by local causes. It is highly probable that inattention to early vaccination may be the immediate cause of a greater mortality at the higher ages in America than in this country. A difference in this respect exists also between the towns of England and Scotland. The proportion of deaths above twenty years of age by small-pox, in Manchester, amounts to 1.687 per cent. of the whole deaths by that disease, and to 2.316 per cent. in Liverpool; whereas the proportion above that age cut off by small-pox amounts to 4.479 per cent. in Edinburgh. However much this effect in Glasgow and Edinburgh is produced by inattention to vaccination, the evil is very much the same in both cities, so far as the proportion at the higher ages is taken into account. It appears, also, from the returns, that the proportion of deaths by small-pox to the population in Edinburgh, is not half so great as that in Glasgow; and, as small-pox is much more destructive in some years than in others, and as the comparison only extends over three years for Edinburgh, and over five years for Glasgow, this comparison of the total amount of deaths by small-pox may be more favourable to Edinburgh than it ought to be.

Hooping-Cough.—This table shows the amount of deaths from hooping-cough, under and above certain ages, in different towns, and proportions which the amount of deaths at these ages bear to the whole amount of deaths by that disease in each town respectively:—

	Glasgow.	Edinburgh.	N. York.	Philad.	Birming.
Under 2 years, - - - - - -	66.37	66.38	67.52	77.48	
" 5 " - - - - - -	91.52	92.87	93.51	95.03	93.42
" 20 " - - - - - -	99.77	100.00	99.78	100.00	100.00
Above 20 " - - - - - -	0.22	0.00	0.21	0.00	

Some of the cases above twenty years should possibly not be classed with hooping-cough. One case, in Glasgow, is stated as being between 40 and 50, and another between 50 and 60. A case above twenty years, given in the New York tables, occurred in 1840, and is recorded as being between 30 and 40 years of age.

Remarks on the tables.—The data which have been adduced seem to demonstrate that the proportions in the amount of deaths under any given age, by the diseases which have been selected for consideration, viz., fevers, measles, scarlet fever, small-pox, and hooping-cough, to the whole amount of deaths by each disease respectively, are almost identical, although the same amount of deaths by the same disease is very different in each city. In some instances, where the circumstances of the people vary much from each other, a corresponding variation takes place in the mortality at the same ages. This is peculiarly exemplified by the deductions in reference to small-pox from the New York and Philadelphia mortality bills; but, notwithstanding the great difference between the results in America and in Scotland, in the mortality from this disease, it is important to observe that the proportion of the deaths by this disease in New York exactly corresponds with those for the same age in Philadelphia, the circumstances of these towns, in relation to small-pox, being much alike. The variations in the higher ages may probably depend on causes capable of detection on further inquiry; and such interferences being allowed for the intimate correspondence of the results pointed out, cannot be looked upon as accidental, but as the result of precise laws, which regulate the amount of mortality at every age. Two causes must be especially considered as having a constant tendency to effect a certain variation in these results, viz., medical treatment, and a proper supply of wholesome and nutritive food. Though it appears from these results that the medical practitioner does not possess that indiscriminate command over the life of his patient that has sometimes been ascribed to him, yet it is very apparent that, by judicious treatment, the medical man has much in his power in the way of placing the system of his patient in the most favourable circumstances for resisting the effects of the disease. If the patient, however, has been previously reduced by a scanty or improper diet, it may become difficult, perhaps even impossible, to supply the remedy under such circumstances; therefore it might be apprehended that even greater variations should occur in these proportions than are indicated by the details which have been discussed; but we must bear in mind that the practice of the medical man is not limited to individuals of a particular age, but is extended to whole families; and, in a similar manner, where destitution prevails, it very generally falls upon families at all ages, as well as upon particular persons.

An acquaintance with the laws of mortality which we have now considered, will not only aid us in arriving at a true knowledge of the sanitary conditions of towns, and enable us to point out the remedies for excessive mortality, but they will assist, also, in guiding the medical practitioner in the proper treatment of his patient. A knowledge of these laws is also necessary for the construction of proper annuity and life-assurance tables. Any calculations that are wholly founded on the average of life in other countries must necessarily be more or less fallacious, as it is obvious that the average duration of human life must vary with the diseases which are most prevalent in the country; and it is well known that many countries, and even many districts, have diseases more or less peculiar to themselves, and differing in their law of mortality.—*Proceedings of Philosophical Society of Glasgow*, June 3, 1844.

CHEMISTRY.

70. *Liquefaction and Solidification of Gases.*—Dr. FARADAY brought forward this subject at the Royal Institution, as the Friday Evening Lecture, Jan. 31.

So long ago as the year 1823, he had been engaged in an endeavour to reduce gases into a fluid state; the means he employed had been to generate the gases in a confined space, and the result had been that he succeeded with the nine following:—Chlorine, hydrochloric acid, sulphurous acid, sulphuretted hydrogen, carbonic acid, euchlorine, nitrous oxide, cyanogen, and ammonia. Since that period the subject has been pursued by others, and a variety of means have been devised to reduce gases to the state of fluid, and further, to solidify some of them. Thus cyanogen and carbonic acid have been rendered solid, and arseniuretted hydrogen, fluid. The means of rendering carbonic acid solid, which may be regarded as the type of the others, as is well known, was devised by Thilorier; and by availing himself of the great cold produced by solid carbonic acid when mixed with ether, together with the air-pump to render the evaporation more rapid, Dr. Faraday has succeeded in reducing to a fluid state the six following gases:—Olifiant gas, phosphuretted hydrogen, hydriodic acid, hydrobromic acid, fluoboron, and fluosilicon; and of rendering solid, sulphurous acid, sulphuretted hydrogen, euchlorine, nitrous oxide, hydriodic acid, and hydrobromic acid.

The method of proceeding, and the principles upon which it is based, are as follow:—The freezing point of mercury is—40°, of carbonic acid,—70°; the cold produced by mixing solid carbonic acid and ether,—105°. By placing the latter under the air-pump the temperature may be reduced to—160°; and Dr. Faraday conceives that by using solid nitrous oxide, instead of carbonic acid, a temperature far lower may be obtained, and by its means, combined with a very high degree of pressure, he thinks oxygen, hydrogen and nitrogen, will certainly be reduced to the fluid or solid state. In fact, he had rendered oxygen fluid, but the enormous pressure had caused the gas to escape through the substance of the metallic stoppers used to close the glass tubes in which the gas was confined. Dr. Faraday had found that common flint glass was quite inadequate tothe purpose, and had substituted green bottle-glass for it, with perfect success. Tubes made of this glass will bear enormous pressure, and if they give way they do not fly into pieces, but rend open in a vertical direction, so as to do no mischief. By connecting a reservoir of gas with a long metallic tube, at the end of which is attached a bent tube of glass, passing into a bath of solid carbonic acid and ether, under the receiver of an air-pump, and by means of a force-pump pressing into this tube the gas with a force equal to about forty or fifty atmospheres, it becomes fluid or solid in the glass tube, which may then be removed and sealed. It is thus, by combining great pressure with the lowest possible degree of cold, that gaseous bodies are reduced to a solid or liquid state; and Dr. Faraday hopes ere long to decide in this way the disputed questions as to the metallic or non-metallic characters of hydrogen and nitrogen.

Some of the results already obtained are highly curious and important in a scientific point of view; thus ammonia in a solid form is a crystalline white substance, heavier than liquid ammonia, and almost inodorous. Oxide of chlorine is a beautiful orange-red crystalline substance. Alcohol becomes thick and viscid, like cold oil, but does not crystallize; and so with caoutchene, oil of turpentine, &c.—*Lancet*, March 1, 1845.

AMERICAN INTELLIGENCE.

ORIGINAL COMMUNICATIONS.

Case of very extensive Suppuration upon the Brain. By G. O. Sumner, M. D., of New Haven.

In the early part of the winter of 1837–38, H. H., of Hartford, Ct., aged 11 years, in learning to skate had a severe fall on the ice, striking the anterior and superior part of the left side of his head. After this, he complained much and frequently of severe pain in his head—and increased heat of the forehead was frequently perceptible. These symptoms continued through the winter. He was employed a good deal, during this period, in setting up the pins at a nine-pin alley in his neighbourhood. This employment obliged him to frequently *stoop low*. A few days defore my first visit to him, he had fallen against the stove; but the hurt from this fall seemed slight.

On Saturday, March 3d, 1838, he was seized, while on the ice, (where he had been but a very short time,) and without any hurt at that time, with *intense pain* in the forepart of the head. He came home, and continued in very great distress, up to Monday, P. M., 5th March, at which time I made him my first visit. He had then intense pain and some delirium; pulse frequent, and rather small; face pale and with an expression denoting great physical anguish; not much fever.

A blister to the back of his neck, and a cathartic of calomel and jalap, were the principal remedies used. Leeches or cups might, no doubt, with great propriety have been resorted to, but the extreme poverty of the family hindered me at this time, and afterwards restricted me in the employment of remedial means.

On Tuesday the boy was delirious, and it was difficult to get a rational word from him, or even to get his attention—he talked almost constantly —tossing of his arms—clawing and picking, &c.

The cathartic had produced one sparing operation—blister had drawn well.

It being difficult to get medicine into his mouth, as also to have it retained by the stomach, I ordered calomel, grs. iij or iv, once in one or two hours, till a free catharsis should be produced; also applied a blister to each temple.

On Wednesday all the symptoms were exacerbated; in fact, the case appearing so hopeless that I did but little. The calomel had been given, and retained, but had not operated on his bowels.

A trait in his delirium was, the *remarkable quickening* of his memory. He would call up and talk about as present realities a multitude of trivial matters, many of which no one would have expected him ever to have thought of again. His friends remarked, that he seemed to have talked over every thing that had occurred within his knowledge during the winter.

During the whole period of his illness, or from his first seizure on the ice up to within an hour or two of his death, his bodily anguish seemed extreme. He did not close his eyes in sleep from the time of my first visit to him till he closed them in the sleep of death.

As above intimated, a state of comparative quietude took place for an hour or two previous to his death, which occurred, just at eve, on Wednesday, 7th of March.

Autopsy.—Present Drs. S. Fuller, Dodge, Holmes, Hawley and myself. *We found the whole surface of the cerebrum, at top, base and sides, in a state of suppuration;* a good deal of purulent matter had been thrown out, and most of it seemed to lie *under* the arachnoid membrane, *confined betwixt it and the substance of the brain.* A portion of it, however, was *exterior* to the arachnoid, loose and floating—and this portion appeared to have been furnished by the juxtaposed surface of both the dura mater and the arachnoid membrane. Of such extent and degree was the suppuration, that it gave to the whole surface of the cerebrum, a decided and pretty uniformly *yellow* appearance—as from a layer of pus betwixt the brain and its investing membranes.

Some little purulent matter was found on the surfaces of the ventricles, and considerable more *water* there than natural. Little or no purulency upon the membranes of the *cerebellum*, or on any part of that viscus. The vessels of the brain, generally, were considerably more turgescent than natural.

Extirpation of a Scirrhous Parotid Gland. By H. H. Wheeler, M. D., of Dundaff, Susquehanna Co., Pa.—J. T. Dimock, of this county, presented himself in October, 1842, with a tumour in the cervical region, extending from anterior to the meatus and six lines above it to the apex of the anterior superior cervical region, or about five inches in length, and two in its transverse diameter. The inferior half presented the common appearances of an adipose tumour, which he said made its first appearance fifteen years previously, but caused no pain or uneasiness until within the last two years, when what now constituted the superior portion, situated under the ear, and behind the maxillary angle, became very painful, with slight increase of size, presenting an irregular, knotty appearance. The size continued to increase until the time I saw him, when the whole united presented the dimensions given above. The evidently scirrhous nature of the glandular portion induced me to recommend an immediate removal of the whole tumour. This was not consented to until December 18th, when the severe lancinating pains, with some constitutional derangement, had increased so much that an immediate extirpation was evidently the only measure that would afford a chance of prolonging life, even for a short time.

The operation was commenced by making two semilunar incisions from the cartilages of the ear to the apex of the superior anterior cervical region, meeting at either extremity, leaving, external to them, integument sufficient for closing the wound after the operation.

From these, the dissection was performed carefully around the irregular surface of the tumour, during which it was found to be so very vascular, that the finger of an assistant was necessary at almost every cut of the knife, to restrain hemorrhage from the divided arteries. This pressure with the fingers, continued for a few moments, was thus far successful without applying ligatures, while the dissection was continued under the lower portion of the tumour, dividing in succession the strong musculo-cellular attachments of the diseased mass to the surrounding parts, until the external carotid artery was seen passing into its base.

Around this two ligatures were passed, the artery divided between them, and the removal of the tumour finished by continuing to detach it from the anterior edge of the sterno-mastoid muscle, mastoid process, cartilage of the ear, angle of the jaw, and pterygoid muscles. After securing by ligature another vessel that was seen bleeding freely from behind the angle of the inferior maxillary bone, near the styloid process, deep in the wound was to be seen, laid bare, the ligaments of the inferior maxillary articulation, the cartilage of the ear, mastoid process, sterno-mastoid, digastric, and one of the pterygoid muscles.

In the bottom was the internal carotid artery uninjured, and the ligated extremity of the external one.

The paralysis of the face, as far as the median line, proved the division of the portia dura, where it passes through the parotid gland. The wound, after being freed from blood, was closed with two sutures and adhesive straps, so as to present the appearance, externally, of a straight incision five inches in length. The loss of blood during the operation was considerable, (two lbs. or more), owing to the great number of branches of the external carotid that were distributed through and around the tumour in all directions, which it was impossible to avoid. The upper half of the wound closed by the first intention, the remainder healed rapidly; ligatures came off on the tenth day; on the sixteenth, the wound was quite closed.

The above operation was performed with the assistance and in presence of Drs. Graves, Wright, Harmes and Burr, of adjoining counties.

The fact of the total extirpation of the gland is satisfactorily shown by the structure of the diseased mass itself, as well as the appearance of the wound after it was removed.

DOMESTIC SUMMARY.

Rupture of the Uterus, followed by Utero-intestinal Fistula.—Dr. Wm. N. Morgan, of Germantown, Tenn., relates in the *Western Journ. of Med. and Surg.* (Dec., 1844.) a very remarkable case of this kind, the prominent particulars of which are as follows:—

A coloured woman who had had five children, was seized 20 Dec. 1841, with severe labour pains, and the membranes were very early ruptured. She remained in this situation, with excruciating pains for about 26 hours, attended by a midwife. A physician was then called in, who found a shoulder presentation, the arm having descended and the child low down in the pelvis, firmly grasped by the uterus and the pains still very severe. He bled her freely and gave an anodyne, after which the pains diminished, and he was able to turn and deliver by the feet, though with much difficulty.

After her delivery she seemed as well as usual, except that she was troubled with costiveness, which had existed some seven or eight days previous to parturition.

Thirty-six hours after delivery Dr. M. was called to see her, and found her labouring under obstinate constipation of the bowels, though she had taken 9 or 10 ounces of castor oil, and stimulating enemas had been freely used. With this, great soreness of the abdomen existed, accompanied by extreme distension from the lower portion of the sternum to the pubis; her tongue was furred; pulse 120 a minute. The purgatives employed having accomplished nothing, Dr. M. ordered ol. ricini ℥ij, ol. tiglii gtt. ii, to be administered forthwith, and a blister plaster to be applied to the abdomen.

By persevering in the use of these cathartics, calomel, gamboge, &c., aided by enemas, her bowels were evacuated in four days, after having been inactive ten or twelve.

From this period, there was an abatement of all the alarming symptoms, attended with an evident improvement of the system in general, though the uterus remained above its natural situation, much hardened, rather enlarged, and extremely painful on pressure. She continued to improve slowly for about ten days. At the expiration of this time, she was suddenly and violently attacked with uterine hemorrhage, attended with great relaxation of the womb, and prostration of the vital energies.

Dr. M. was again called in haste to see her, and found her in the condition above described. The hemorrhage yielded to the use of the acetate of lead, opium and ipecacuan., assisted by frictions over the abdomen, and also by astringent injections *per vaginam*.

So soon as she recovered from the prostrating effects of hemorrhage, she again began to improve as before, with regular discharges from her bowels, and a slight inclination to diarrhœa, which, however, was easily controlled by the use of calomel and opium. She remained in this condition for seven days after the flooding ceased, making about eighteen from the period of her confinement, when Dr. M. was greatly surprised to learn that she was discharging fæcal matter through the vagina, and none in the natural way. He immediately proceeded to an examination, expecting to find a communication between the rectum and vagina; but finding no rupture there, pushed his examination further. About the left fundus of the uterus the patient had complained much of soreness, and on pushing the fingers into that region a large collection of fæcal matter was discovered. A syringe being introduced, several ounces of fluid fæces were removed. She continued to void her fæces involuntarily by the vagina thirty days, during which time she experienced rapid emaciation. About the last of January a favourable change took place. The evacuation of fæcal matter through the uterus ceased, and she began gradually to improve in health and strength, suffering occasionally from pain about the point of the rupture, and being troubled with œdema of the face, feet, and hands.

It is now about three years since this case occurred. The patient has enjoyed tolerable health since the time above mentioned, with the exception of occasional colic pains in the region of the colon, irregular menstruation, and slight diarrhœa. At times she complains of soreness to the left of the umbilicus, at the point where the rupture occurred. She has had frequent communications with her husband, and enjoys the connection as before, but has not conceived, although she bred rapidly before this accident occurred.

On her recovery from this state of things, when not under the influence of cathartics, her fæces are of the natural shape and colour; the action of her bowels is easily induced, and without more pain than is common under the ordinary operation of cathartics. During the time that her fæces were passing *per vaginam*, the only medicines that were given were tonics, with an occasional dose of morphine.

Sanitary condition of Philadelphia.—To those acquainted with the beautiful city of Penn, its wide and well-drained streets, proverbial for their cleanliness, numerous open squares, filled with luxuriant shady trees, gravel walks and fountains, the following picture of its wretchedness will appear not a little surprising. In a long article "*On the best modes of representing accurately, by Statistical Returns, the Duration of Life, and the Pressure and Progress of the Causes of Mortality amongst the different Classes of the community, and amongst Populations of different districts and countries*, by Edwin Chadwick, Esq., F. R. S., (read before the Statistical Society of London, Dec. 18, 1843), and published in the *Journal of the Statistical Society*, for April, 1844, is the following statement:

"I have been favoured with a table of the mortality at the different ages of life in Philadelphia, from the year 1830 to 1842 inclusive, from the Board of Health of that city. Travellers misled by the fallacious assumption of the proportions of death to the population (a fallacy exemplified in the table itself) which have ranged from 1 in 33 to 1 in 47, have represented this as a healthy city. It was formerly excessively ravaged by fevers. It has been greatly improved by the introduction of water, and the mortality has been diminished; but it is ill drained. It is situated like the worst town districts in England amidst privies and cesspools, and in other respects its sanitary condition is inferior. In summer the heat is intense, decomposition active, and there is an excessively severe mortality. The infantile mortality appears to be as great as in the lowest districts of Dublin. It will be seen in the subjoined table that 50 per cent.—half who are born—die on the average before the fifth year of age. On the proposed hypothetical modes of preparing life tables, the expectation of life in that city to all born would be only 5 years; but the actual mean of existence is 20 years and 7 months to all who die.

Mr. Chadwick asserts "that 50 per cent.—half who are born, die on the average before the 5th year of age." Now, the number of births registered in Philadelphia in 1830, a year referred to by him, was 7628. The total mortality under the 5th year, including 303 still-born, was 2217; leaving a balance of 5411, instead of 2217, the number which should remain, to bear out his assertion. The table prepared by him, which professes to show the mortality in Philadelphia for different years from 1830 to 1843, inclusive, is very far from presenting accurate results. The error in relation to the proportion of deaths in infancy to the births, is not the only one connected with that year. In his table, the deaths under one year of age, is set down at 1305. This embraces 302 still-born, which should always be excluded from such statements, as their retention tends to increase the proportion of deaths to the population in which they have never been enumerated. He accordingly reckons the deaths at 1 in 40 of the inhabitants, whereas a more correct computation makes the ratio of general mortality 1 in 45.4.

This may be regarded a low rate of mortality when it is considered that Philadelphia contains a large coloured population, the proportion of deaths among which is about 2 to 1 of the whites.

These errors, connected with the computation for only one year of the series of 14 years, must, we think, be sufficient to cause the statements exhibited by Mr. Chadwick in regard to the "pressure and progress of the causes of mortality," so far as Philadelphia is concerned, to be taken with great allowance.

It will not be denied that the infantile mortality in Philadelphia is fearfully great. But, it is perfectly understood by those having the best opportunities of knowing, that the causes operating so unfavourably, are comparatively rare within the city proper, and better portions of the adjoining districts, where the pavements are good and well regulated so as to favour thorough drainage by gutters and sewers. The badly drained and unpaved places, to be met with in the outskirts and some portions of the adjoining districts, where the poorer class of labourers, and especially the blacks, congregate in small and badly-aired dwellings, furnish by far the largest proportion of the annual mortality, both general and infantile, the latter especially.

Spontaneous Rupture of the Spleen.—A case of this rare occurrence has recently been related by Dr. J. B. Potter, M. D., of Canal Winchester, Ohio, in the *Western Lancet* for January, 1845.

The subject of the case was a man 35 years of age, of good habits, who had enjoyed uninterrupted health with the exception of five or six paroxysms of intermittent fever, about 12 months previously.

On the 16th July, 1844, he was attacked with slight fever, and malaise, but not sufficient to confine him entirely to his room: continued in this condition, until the morning of the 20th, when he remarked he would be able to resume his labour by the 22d; appetite, which had previously during his illness been poor, good; ate freely of "soup." About 3 P. M., complained of severe pain in the "stomach and belly," followed in a few minutes with vomiting of the contents of the stomach, immediately after which he said his "belly would burst," and that he was dying. Expired at 5 P. M.

On post mortem examination, "about half a gallon of venous coagula was found, which proceeded from a rupture about 1½ inches long, on the inferior portion of the capsule of the spleen, the parenchymatous structure of the spleen was entirely broken down and destroyed, constituting a grumous mass, so soft as to be easily washed away; stomach and bowels normal, liver slightly enlarged and congested."

[A case of a similar character is recorded by Dr. Neill in the number of this Journal for October, 1842.—See p. 369.]

Bleeding internal Hemorrhoides.—Dr. JOHN WATSON, in an interesting paper in the *New York Journal of Medicine*, (July, 1844,) on Hemorrhoides and Prolapsus ani, states that he has found more benefit for bleeding internal hemorrhoides, in the use of injections of acetate of lead, than in any other form of local application. He commonly employs this of the strength of a drachm to eight ounces of rain water, and never administers over two ounces of this solution at a time. He repeats the injection after each return of hemorrhage; and, as this most commonly occurs during the effort to evacuate the bowels, he commonly advises the patient to resort to the injection immediately after every stool, until the hemorrhage has ceased for a few days. The usual internal medicines are, the occasional administration of a blue pill, especially where there is reason to suspect any disturbance in the functions of the liver; a dose of oil, or of the extract of taraxicum; or some other mild laxative. But, for the mere evacuation of the bowels, and with the view of correcting an obstinately-constipated habit, he knows of no article better than one or the other of the following confections.

First.—	Common Rosin, well pulverized,	℥i.	
	Clarified Honey,	℥v.	M.
Second.—	Common Rosin, as before,	℥i.	
	Balsam of Copaiva,	℥ss.	
	Clarified Honey,	℥ivss.	M.

The last of these, when it can be borne, is, Dr. W. says, the most efficacious. But to many persons, and particularly delicate females, the balsam is so nauseous that they are unable to use it. The ordinary dose is from two to three drachms at bed-time. This dose is generally sufficent to produce one soft and consistent stool early on the following morning, without griping, uneasiness, or any of the usually disagreeable attendants of cathartic medicine. These measures are to be assisted by the occasional use of the hip-bath; by cooling, anodyne, and emollient clysters; by a course of regimen most suitable to keep the bowels regular, without, however, stimulating them; and above all, by carefully and gently reducing the prolapsus, after every evacuation of the bowels, and guarding against all movement likely to protrude it in the intervals.

Abortion—the Umbilical Cord wound tightly around the leg of the Fœtus. (*New York Journ. Med.*, Jan., 1845.)—Dr. GRISCOM reported the following case to the New York Medical and Surgical Society:—"A highly respectable and intelligent lady became *enceinte*, as she supposed, about eight months ago. The menses disappeared; the breasts became distended with milk, and continued so until the 18th inst. She, however, required my attendance occasionally, on account of irregular uterine hemorrhage, unaccompanied with pain. She was otherwise in excellent health. Last week she received information of the sudden loss of a friend, which caused her great grief; this induced severe pain in the uterine region, at first intermittent. The uterine tumour seemed about the size of my fist. In a few hours the pain became uninterrupted and excessive, and after a time, an ovum was expelled rather larger than a goose egg. It was found to contain a well-formed fœtus of *three or four months.* On examining it, I found the umbilical cord, which was longer than usual, wound around the leg, nearly a dozen times, as closely as thread upon a spool It required as much force as I thought the cord would bear to unwind it."

The cause of death of the fœtus Dr. G. conceives to have been produced by compression of the cord—"as the limb grew, the cord became compressed, and eventually the circulation through it suspended."

—

Exsection of Inferior Maxillary Bone. (*New York Journ. Med.*, Jan., 1845.)—This operation has lately been performed by Dr. MOTT on a young man, affected with periosteal disease of the inferior maxilla. "As a preliminary step, the common carotid of the right side was secured, immediately after which, as the patient seemed in no way prostrated, it was deemed advisable to continue, and with the curvilinear incision the operation commenced, and throughout its entire steps gave the utmost satisfaction to all who were present. The exsection was made from the second incisor tooth to the temporo-maxillary articulation; the parts were then drawn together by sutures, and the patient was placed in bed, where he soon fell into a profound sleep."

A month after the operation the patient was doing remarkably well.

—

Western Penitentiary of Pennsylvania.—The report of the Inspectors of this Institution for the year 1844, with the accompanying documents, afford a very favourable account of its condition, and furnish some views in relation to the Pennsylvania system of prison discipline worthy of attention.

The Inspectors in their report remark,

"In presenting our annual report to the legislature, we again congratulate you upon the complete success attending the Pennsylvania system of prison discipline. Fiercely attacked as it has been, upon the gratuitous asssumption, that it partook more of the barbarism of former ages than the mild and benevolent usages of modern Christendom, an experience of twenty years has proved the fallacy of these philippics, and illustrated its benefits and tested its results.

"An associate system of labour never can be conducive to reformation. The noviciate can never be improved by intercourse with the hardened convict; and although they may both be watched with untiring vigilance by discreet overseers, yet the practised criminal will communicate his baneful vices, by more than sympathetic influence, to the tender and susceptible mind of the youthful offender.

"It is true that, under the separate system, the criminal has no communication, other than that which he enjoys with the officers and inspectors of the Penitentiary, but this very seclusion brings his mind to the contemplation of his former misdeeds, which is the first step towards a genuine amendment of life. The interviews of the officers with the convicts are conducted with firmness and kindness, and with exhortations to reform, that they may be restored to that position in society which they would have occupied had they not been guilty of a violation of its laws. In all our visits, we have scarcely found an unwilling listener to these admonitions, and the able and elaborate Report of the Moral Instructor, to which we, with great pleasure refer, will advise you in detail of the gratifying success of the treatment adopted by your predecessors of the General Assembly.

"We can cite instances, within our present observation, of men who entered this Penitentiary without a trade, and with little or no education, who are now moral and respectable members of the community in which they live, pursuing their avocations with an ardour and industry evincive of their gratitude to this public benefaction."

The moral instructor in his report observes,

"The most serious objection brought against the system of 'separate confinement' by its opponents, is laid in its reputed tendency to produce insanity. If such, indeed, be its tendency, the history of this prison presents a singular exception to this influence. Amongst the one hundred and thirty prisoners now incarcerated within its walls, there is but a single case of insanity, and this one is supposed to have been slightly deranged at the time of his first imprisonment: and during the eight years it has been under the supervision and control of the present Warden, there have occurred but two cases of mental derangement. It is passing strange that *here*, among seven or eight hundred prisoners, and during the long period of eight years, there should have been found but two instances of insanity, if the native tendency of solitary confinement is to produce it. Other causes must have operated to produce this fearful malady, where, as in the instance of the Rhode Island state prison, out of forty cases in solitary confinement, ten have become insane; and under the congregated system three out of nineteen have exhibited symptoms of mental derangement. Under mild, affectionate and firm administratron of government, such as distinguishes the present chief executive officer of this institution, supported by competent and kind overseers, there is no danger of insanity resulting from separate confinement. The facts in the case of this prison, for a series of years, prove conclusively that there is none."

Dr. Barton's Operation for the Anchylosis of the Knee-joint.—This operation,—consisting in the removal of a wedge-shaped portion of bone,—has been recently performed by Dr. G. Buck on a patient in the New York Hospital. The anchylosis resulted from a wound with an axe seven years previously. The leg was united to the thigh at a right angle.

University of Pennsylvania.—From the catalogue of this institution, recently published, we learn that the whole number of students is 790, of which number there are in the Collegiate Department, 120; in the Medical Department, 446; Academical Department, 136; and in the Charity, (English Schools,) 88.

New Works.—Messrs. Lea & Blanchard have recently published the following valuable works:—

The Principles of Surgery, by James Miller, Professor of Surgery in the University of Edinburgh, in one volume, octavo.

Ashwell on the Diseases peculiar to Women, edited by P. B. Goddard, M. D., and complete in one octavo volume.

Meigs' Translation of Colombat de l'Isère on the Diseases of Females, in one large octavo volume.

Sir Astley Cooper on the Anatomy and Diseases of the Testis and Thymus Gland. In one large royal octavo volume, with numerous lithographic plates.

Works preparing for Publication.—Messrs. Lea & Blanchard have in press and will issue very shortly

Esquirol's Great Work on Mental Maladies, translated by Dr. E. K. Hunt, of Hartford.

Sir Astley Cooper's works on the Anatomy and Diseases of the Breast, with numerous plates.

Guthrie on the Diseases of the Bladder and Urethra, and

Fowne's Manual of Chemistry.

INDEX.

A

Abercrombie, obituary of, 243.
Abortion, umbilical cord wound tightly around leg, 524.
Acetate of iron as a remedy for arsenical preparations, 512.
Aconitum napellus, poisoning with, 237.
Acupuncture, ununited fracture treated by, 219.
Air in veins, means of preventing the fatal accidents from, 170.
Albuminuria, 193, 194.
Alimentary substances, 184.
Amnesia, complicating rheumatism, 476.
Amputation, neuralgia of stump after, 484.
Anæmia, 194.
Aneurism of right subclavian artery—attempt to pass a ligature on arteria innominata, 492.
———, popliteal, in a child.
Anus, warty excrescence near verge of, 217.
Arsenic in the earth of cemeteries, 237.
Arsenical preparations, acetate of iron as a remedy for, 512.
Arteria innominata, attempt to pass a ligature on, 492.
Arteries, mortality attending operation for tying large, 223.
Ashwell, treatise on diseases of females, 359.
Association of Medical Superintendents for the Insane, proceedings of, 249.
Asthmatic affections, caroub of Judea in, 191.
Atlee, extirpation of fibrous tumour of uterus, 309.
Aubinais, polypus of uterus adherent to placenta, 231.
Auscultation, signs of in young children, 208.

B

Barbieri, recovery from wound with hernia of lung, 222.
Barton's operation for anchylosis of knee-joint, 526.
Belladonna, influence on iris undiminished by long use, 499.
Bellingiere, balsam of copaiba in chronic bronchitis, 192.
Bell's Report of McLean Asylum for Insane, 422.
Benson, undefined suppuration of brain, 454.
Benzoic acid in incontinence of urine, 458.
Bernard, functions of spinal accessory nerve, 447.
Bernard and Barreswell on alimentary substances, 184.
———, properties of gastric juice, 445.
———'s new treatment of lachrymal fistulæ and chronic lachrymations, 227.
Bertini and Bellingiere, nitrate of silver in chronic diarrhœa, 192.
Bigelow and Bemis's report of trial of Abner Rogers, Jr., for murder, 403.
Bile, on its importance in the animal economy, 185.
Bird, removal of a diseased ovary, 219.
Birth, relative size and weight of male and female at, 240.
Bischoff, on Periodical Ripening and Separation of ova of Mammalia, 113.
Blacquiere, gunshot wound of the anterior lobes of the brain, 186.
Blake, physiological action of medicines, 512.
Blisters, cotton as a dressing to, 188.
Blood, analysis of in persons exposed to malaria, 200.
———, buffy, 443.
———, chemical physiology of red colouring matter of, 439.
———, coloration of, 181.
———, new method of analyzing, 442.
———, passage of metallic mercury into, 200.
Blondlot, nature and properties of gastric juice, 443.
Bodinier, nature of fluid discharged from ear in œdema of scalp, 211.
Bond's case of rupture of the uterus, 177.
Bonino, excision of the head of the femur, 487.
Boston Lunatic Asylum Report, 155.
Boudet, chemical composition of lungs and of tubercles, 186.
Bourchardat, croton oil plaster, 188.
Bowles, removal of diseased ovarium, 255.
Brain, undefined suppuration of, 454.
Breast milk, cyst in, 495.
Breasts, enlargement of in a male, 446.
Brigham on influence of mental cultivation on health, 437.
———, removal of seventeen inches of the small intestines, recovery, 355.
———'s Report of New York State Lunatic Asylum, 430.
Bronchitis, copaiva in, 192.
Buck, danger from administering opium in strangulated hernia, 257.
Buck's operation for anchylosis of knee-joint, 526.
Bursal, swelling of the wrist and palm of the hand, 225.

Burton, new mode of making medicated tinctures, 190.

C

Campbell, time required for coins to pass through intestines, 469.
Capuron and Danyau, on influence of shortness of umbilical cord on labour, 506.
Caroub of Judea in asthmatic affections, 191.
Cæsarian operation, 228.
Cataract, peculiar appearance in, 500.
Chadwick, interment in towns, 131.
Chancre, prognosis of, 489.
Chapman's Lectures on Eruptive Fevers, &c., 180.
Chest, gunshot wound of, 225.
———————, a foreign body remaining in lung 25 years, 342.
Children, mortality of at St. Louis, 255.
Chloride of lime in gonorrhœa, 498.
————— in puriform ophthalmia, 502.
Cinchona bark, new preparation of, 452.
Clark, lumbricus discharged from male urethra, 261.
Cleft palate, staphyloraphy, 493.
Coins, time required for them to pass through intestines, 469.
College of Physicians of Philadelphia, 177.
Colombat, Treatise on Diseases of Females, &c., 359.
Colon, strangulated by the meso-colon, 260.
Colours, inability to distinguish, 346.
Congestive, as applied to low forms of fever, 293.
Congestive fever, 251.
Conjunctiva, copper-coloured syphilitic eruption on, 502.
Cooper on Testis, 438.
——— Thymus gland, 438.
Copaiba more active when combined with purgatives, 477.
Copper tanks at St. Helena, 240.
Cortex frangulæ, 189.
Cotton as a dressing to blisters, 188.
Cox, gunshot wound of chest, 225.
Croton oil plaster, 188.
Cryptogami of the hair constituting Herpes Tonsurans, 479.
Cyclopædia of Practical Medicine, 437.
Cyst on iris, 227.

D

Dalrymple, cyst on iris, 227.
Daniell, warty excrescence near verge of anus, 217.
———, enormous steatoma removed from shoulder, 217.
Danville, gunshot wound, 212.
Darby, prolapsus uterus, pregnancy, 232.
Davidson on typhus, 469.
Davis, colon strangulated by meso-colon, 260.
Delcour, nitrate of potassa and benzoic acid, in incontinence of urine, 453.
Delivery of fœtus through rupture of uterus and abdominal parietes, 228.
De Morgan, appearance on dissection in case of suicidal suspension, 512.
Derner, rupture of omentum, 238.
Deschamps, ovum and corpus luteum of man and animals, 448.
Devay, mode of preparing valerianate of zinc, 188.
———, valerianate of zinc in nervous affections, 198.
Diarrhœa, nitrate of silver in, 192.
Dierbach, latest discoveries in Materia Medica, 401.
Digitalis, efficacy in pulmonary hepatization, 483.
——— in certain diseases of the heart, 455.
Donovan, new preparation of cinchona bark, 452.
Dropsy of amnion, 232.
Druit, uses of pure tannin, 192.
Duncan, neuralgia of stump after amputation, 484.
Dunglison, on human health, 379.

E

Ear, extraction of foreign bodies from, 336.
—, foreign bodies in, 200.
—, discharges from, 225.
Earle, inability to distinguish colours, 346.
——— on pulse of the insane, 56.
Empyema, diagnosis of, 202.
Encephalitis, singular case of, 198.
Encephaloid disease of tibia, &c., 103.
Enterotomy, in internal strangulation of small intestine, 483.
Epilepsy from foreign bodies in ear, 200.
Erysipelas, epidemic, 222.
Evolution of fœtus, 507.
Euphorbia lathyris, poisoning with, 258.
Eyeball, protrusion of, 85.

F

Faraday, on liquefaction and solidification of gases, 518.
Fatty oils, action of on animal economy, 481.
Feigned diseases, 514.
Females, treatises on diseases of, 359.
Femur, excision of head of, 487.
Fergusson, cleft palate, staphyloraphy, 493.
Fischer, gravid uterus in sac of an old inguinal hernia, 230.
Fistula in ano, 499.
Fœcundation of the mammiferæ, theory of, 113.
Forearm, luxation of forwards, without fracture of olecranon, 220.
Foreign body in trachea, 357.
Fourcault on causes of albuminuria, 193.
Fourgeaud, mortality of children at St. Louis, 253.
Fracture during pregnancy, 257.

G

Galvanism, in uterine hemorrhage, 503.
Gases, liquefaction and solidification of, 518.
Gastric juice, lithontriptic action of, 189.
————, nature and properties of, 443.
————, properties of, 445.
Genital organs, atrophy of, 446.
Gerdy, fungous from synovial capsule of the knee, 497.
Gilbert, dislocation of large joints reduced by power derived from twisted rope, 354.
Gloucester County Lunatic Asylum Report, 157.
Gluge and Thiernesse, researches on the action of fatty oils on the animal economy, 481.
Gonorrhœa, chloride of lime in, 498.
Gout, Ure's researches on, 472.
Gravid uterus in sac of old inguinal hernia, 230.
Greene on empyema, 205.
Greenwood's will—monomania, 508.
Gregory, deaths from small-pox after vaccination, 197.
Griscom, abortion, umbilical cord wound tightly around leg, 524.
——— on sanitary condition of labouring population of New York, 396.
Gruby, cryptogami of the hair constituting herpes tonsurans, 479.
Gulliver, buffy blood, 443.
Gumprecht, on cortex frangulæ, 189.
Gunshot wound of the anterior lobes of the brain, 186.
————, the ball passing from the naval to the back without fatal consequences, 212.

H

Hall, chloride of lime in gonorrhœa, 498.
——, ———— in puriform ophthalmia, 502.
——, foreign body in trachea, 357.
——'s surgical cases, 103.
Hamilton, Jamaica dogwood, 450.
Hanwell, lunatic asylum reports, 157.
Hargrave, iliac abscess, 489.
Harrison's Materia Medica and Therapeutics, 436.
Hartford, Report of Retreat for Insane, 155.
Harvey, fistula in ano, 499.
———, radical cure of hydrocele, 498.
Hayn, term of pregnancy exceeded by four weeks, 506.
Heart, digitalis in certain diseases of, 453.
Heat of stoves, influence of on animal life, 183.
Hemorrhoides, treatment of, 524.
Henderson, digitalis in certain diseases of heart, 453.
Hennemann, subcutaneous operations, 174.
Hereditary insanity, 239.
Hernia, cases of strangulated, 13, 106, 109.
———, mortality attending operation for, 224.
Herpes Tonsurans, produced by cryptogami, 479.
Herrick, rupture of spleen, 257.
Hirtz, influence of shortness of umbilical cord on labour, 506.
Hodgkinson, poison of snakes in Australia, 514.
Horner on preservation of human body for anatomical purposes, 245.
Houston, gunshot wound of chest, the linen patch which enveloped the ball remaining in lung twenty-five years, 343.
Howard's case of remittent fever, 49.
Hufeland, Enchiridion Medicum, 176.
Hunt, on relaxed rectum, 477.
Hydatids of uterus, 239.
Hydrocele, radical cure of, 213, 498.
Hydrometra, 239.
Hygiene, elements of, 379.

I

Ichthyosis intra-uterina, 446.
Iliac abscess, 489.
Iliff, membranous-like formations passed with alvine evacuations, 468.
Ilium, luxation of on sacrum.
———, mortality attending operation for hernia, 224.
Immovable bandages of starched paper, 224.
Incontinence of urine, nitrate of potassa and benzoic acid in, 445.
Inman, mortality attending operation for tying large arteries, 223.
Insane asylum reports, 155, 157.
———, pulse of, 56.
Insanity, hereditary, 239.
———, medical jurisprudence of, 391.
Interment in towns, 131.
Intestine, suture of, 216.
Intestines, removal of seventeen inches of, recovery, 355.
Inverted toe nail, 166.
——— uterus and polypus, diagnosis of, 236.
Iron, preparation of pure proto-ioduret of, 451.
Irvine, twins, an interval of 32 days between their birth, 503.

J

Jacob, influence of belladonna on iris, undiminished by use, 499.
———, peculiar appearance in cataract, 500.
———, poisoning with euphorbia lathyris, 238.
Jacquetant, copaiba more active when combined with purgatives, 477.
Jamaica dogwood, 450.
Jeaffreson, operations for removal of ovarian tumours, 217.
Jobert, milk cyst in breast, 495.
———, on structure of uterus, 131.
Joynes, obstetric auscultation, 89.

K

Kent County Lunatic Asylum Report, 157.

Kirkbride's Report of Pennsylvania Hospital for the Insane, 422.
Knee-joint, singular cause of error in diagnosis of affections of, 216.
Knee, fungus from synovial capsule of, 497.
Kop, preparation of pure proto-ioduret of iron, 451.

L

Lachrymal fistulæ, and chronic lachrymation, new treatment of, 227.
Lambrecht, ovarian dropsy discharging by umbilicus, 476.
Lamothe, epilepsy from foreign body in ear, 200.
Lancaster County Lunatic Asylum Report, 157.
Lauer, efficacy of digitalis in pulmonary hepatization, 488.
Laugier, immovable bandages of starched paper, 224.
Le Conte, extraordinary effect of a stroke of lightning, 254.
Lee, dropsy of amnion, 232.
——, retained placenta, 235.
——, uterine hemorrhage, 233.
Leicester County Lunatic Asylum Report, 157.
Letheby, poisoning with oxalic acid, 511.
Lightning, extraordinary effect of a stroke of, 254.
Lime, poisoning with, 511.
Linsem, amnesia, complicating rheumatism, 476.
Lion, curious case of paralysis, 476.
Lisfranc, diagnosis of polypus and inverted uterus, 236.
————, on some disputed points of medical jurisprudence, 239.
Lithontriptic action of gastric juice, 189.
Lossette, on small-pox in persons who had been vaccinated, 191.
Lumbricus discharged from male urethra, 261.
Lung, wound of with hernia of, 222.
Luxation of iliac bone on sacrum, 213.

M

Macdonnell on diagnosis of empyema, 202.
Magendie, influence of heat of stoves on animal life, 183.
Maine Insane Hospital Report, 414.
Maisonneuve, enterotomy in internal strangulation, 483.
Marsh miasmata, origin of diseases produced by, 456.
Marthens, fracture during pregnancy, 257.
Martin, influence of belladonna on iris undiminished by long use, 499.
Massachusetts, births, marriages, &c., 394.
McDowell's cases of extirpation of diseased ovaria, 261.
McLean Asylum for the Insane, Report of, 423.
Medicines, physiological action of, 512.
Membranous-like formations passed with alvine evacuations, 468.
Mérat, juice of urtica urens in uterine hemorrhage, 231.
Metallic mercury, passage of, into the blood and solid tissues, 200.
Meyer on albuminuria, 194.
Milk cyst in breast, 495.
Millot, lithontriptic action of gastric juice, 189.
Moles, 239.
Mondiere, tænia evacuated through abdominal parietes, 207.
Monin, luxation of the forearm forwards without fracture of the olecranon, 220.
Monomania, case of Greenwood's will, 508.
Morant, epidemic ophthalmia, 226.
Morbus Brightii, pathology and treatment of, 194.
Moreau, causes which determine the sex in generation, 183.
Morgan, rupture of uterus, followed by utero-intestinal fistula, 521.
Mortality at different ages of certain diseases, 515.
Mott, exsection of inferior maxillary bone, 524.
Mulder, products of oxidation of protein, 182.
Mulder's researches on the chemical physiology of red colouring matter of blood, 439.
Murder, trial for, 241.
Murphy, statistics of obstetric practice, 236.
Murray, origin of diseases produced by marsh miasmata, 456.

N

Narcotic extracts, mode of preparing, 190.
Neck, enormous tumour of, removed, 98.
Neuralgia of stump after amputation, 484.
New York, sanitary condition of labouring population of, 396.
—— —— State Lunatic Asylum Report.
Nitrate of silver in chronic diarrhœa, 192.
——— of potassa in incontinence of urine, 453.
Nott, on yellow fever, 277.
Nottingham Lunatic Asylum Report, 157.

O

Obstetric auscultation, 89.
Oldfield, aneurism of right subclavian artery, &c., 492.
Ollivier, arsenic in the earth of cemeteries, 237.
Omentum, rupture of, 238.
Ophthalmia epidemic, 226.
————, puriform, chloride of lime in, 502.
Opium a hazardous remedy in strangulated hernia, 257.
Organic adhesions, Zeis on, 164.
Ovaria, extirpation of, 261.
Ovarian dropsy discharged by umbilicus, 476.
——— tumours, removal of, 217.
Ovary, removal of a diseased, 219, 255.

Ovum and corpus luteum of man and animals, 448.
Oxalic acid, poisoning with, 511.

P

Palli, new method of analyzing the blood, 442.
Palfrey's report of registry of births, deaths and marriages in Massachusetts, 394.
Paralysis, curious case of, 476.
Parotid gland, extirpation of, 520.
———, fibrous tumour of, 223.
Parrish, on term congestive as applied to low forms of fever, 293.
Parturition, varicose tumour of neck of uterus obstructing, 506.
Pellegrini, varicose tumour of neck of uterus obstructing parturition, 506.
Pennsylvania Hospital of the Insane, Report for 1844, 419.
Perini, case of encephalitis, 198.
Perkins, congestive fever, 251.
Philadelphia, sanitary condition of, 522.
Physometra, 239.
Piscidia erythrina, 450.
Placenta, retained, 235.
———, spontaneous expulsion and artificial extraction of before the child in placental presentations, 504.
——— prævia, detaching the placenta in cases of, 505.
Plastic surgery of Celsus, 165.
Pleurisy, symptoms of, produced by intestinal worms, 200.
Poisseuille, venous pulse, 449.
Polypus and inverted uterus, diagnosis of, 236.
Polypus of uterus adherent to placenta, 231.
——— radical cure of hydrocele, 213.
Poisoning with oxalic acid, 511.
——— mortar or quick lime, 511.
——— radix sambuci, 512.
——— tartaric acid, 514.
Poison of snakes in Australia, 514.
Porter, protrusion of eye-balls, 85.
Potter, spontaneous rupture of spleen, 523.
Pouchet, fœcundation of the mammiferæ, 113.
Prael, Cæsarian operation—delivery of fœtus through a rupture of uterus and abdominal parietes, 228.
Pregnancy, duration of, 256.
——— term of exceeding four weeks, 506.
Prolapsus uteri, pregnancy, 232.
Protein, products of oxidation of, 182.
Proto-ioduret of iron, preparation of pure, 451.
Prussic acid, antidote to, 200.
Pulmonary hepatization, efficacy of digitalis in, 483.
Pulse of the insane, 56.
Puriform ophthalmia, chloride of lime in, 502.

R

Raciborski, on puberty, &c., 113.
Radford, galvanism in uterine hemorrhage, 503.
——— detaching the placenta in cases of placenta prævia, 505.
Radix sambuci, poisoning with, 512.
Ramsay, poisoning with monkshood, 237.
Ray's Medical Jurisprudence of Insanity, 391.
Rectum, relaxed, 477.
Remittent fever, Swett on pathology of, 29.
——— Howard's case, 49.
Rees, on morbus Brightii and anæmia, 194.
Respiratory organ, Williams on diseases of, 413.
Revaccinations in the Prussian army, 480.
Reybard, suture of intestine, 210.
Rheumatism, treatment of acute, 461.
Ricord, prognosis of chancre, 489.
Rogers, trial of for murder of Charles Lincoln, 403.
Rognetta, epidemic erysipelas, 222.
Roussilhe, epilepsy from foreign body in the ear, 200.

S

Salvagnoli, analysis of blood of persons exposed to malaria, 200.
Sandham, mode of reducing partial displacement of semilunar cartilages of knee joint, 212.
Scalp, nature of fluid discharged from ear in œdema of, 211.
Schaeffer, on vaccination, revaccination, and susceptibility to small-pox, 480.
Scheerer, coloration of the blood, 181.
Scheidemandel, mode of preparing narcotic extracts, 190.
Schwann, on the importance of bile in the animal economy, 185.
Segalas, influence of traumatic lesions of spinal cord on diseases of urinary organs, 220.
Seidlitz, cotton as a dressing to blisters, 188.
Semilunar cartilages of knee joint, mode of reducing partial luxations of, 212.
Sex, causes which determine it, 183.
Simpson, relative size and weight of male and female at birth, 240.
Simpson, detaching and extracting the placenta before the child in placental presentations, 504.
Sims, extraction of foreign bodies from ear, 336.
Small-pox in those who had been vaccinated, 191.
——— after vaccination, deaths from, 197.
Smee, copper-coloured syphilitic eruption on conjunctiva, 502.
Smellie, ichthyosis intra-uterina, 446.
Smith's antidote to prussic acid, 200.
——— miscellaneous contributions to pathology and therapeutics, 404.
Solon, venous pulse, 449.
Snakes, poison of in Australia, 514.
Spencer, large tumour of neck removed, 98.

Spinal accessory nerve, functions of, 447.
Spinal cord, influence of traumatic lesions of on diseases of urinary organs, 220.
Spleen, rupture of, 257.
———, spontaneous rupture of, 523.
Staphyloraphy, 493.
Steatoma, enormous, removed from shoulder, 217.
Sternum, congenital deficiency of, 450.
Strangulated hernia, opium a hazardous remedy in, 257.
Strangulation by machinery, 514.
Strangulated hernia, Warren on, 13.
——————— Shipman on, 109.
Stump, neuralgia of after amputation, 484.
Subcutaneous operations, 174.
Suicide, 242.
Suicidal suspension, appearances on dissection, 512.
Sulphate of iron with an alkaline carbonate an antidote to prussic acid, 200.
Sumner, extensive suppuration of the cerebral membranes, 519.
Sussewind, evolution and delivery, with presentation of arm and shoulder, 507.
Suture of intestine, 210.
Swett on pathology of remittent fever, 29.
Syme, stricture of urethra, 209.
Syme, popliteal aneurism in a child, 222.
——— bursal swelling of the wrist and palm of the hand, 225.
Syphilis, treatment of by tartar emetic, 221.
Synovial capsule of knee, fungus from, 497.
Syphilitic eruption on conjunctiva, 502.

T

Tænia evacuated through abdominal parietes, 207.
Tannin, uses of, 192.
Tartaric acid, death from, 514.
Taylor's Medical Jurisprudence, 431.
Tinctures, new mode of making, 190.
Trachea, foreign body in, 357.
Tracheotomy, 357.
Trousseau, on signs of auscultation in young children, 208.
Tubercles, chemical composition of, 186.
Twins, an interval of 32 days between their birth, 503.
Typhus, Davidson on, 469.

U

Ununited fracture, treated by acupuncture, 219.
Ure, researches on gout, 472.
Urethra, lumbricus discharged from, 261.
———, treatment of obstinate stricture of, 209.
Urinary passages, influence of traumatic lesions of spinal cord on diseases of, 220.
Urtica urens in uterine hemorrhage, 231.
Uterine hemorrhage, 233.
——————, galvanism in, 503.
Uterus, dropsy of, 239.
Uterus, extirpation of fibrous tumour of, 309.
———, hydatids of, 239.
———, inverted diagnosis of, 236.
———, rupture of, 177.
———, —————, with utero-intestinal fistula, 521.
———, structure of, 181.
Utica, Report of State Lunatic Asylum at, 430.

V

Vaccination, &c., 480.
Valerianate of zinc, mode of preparing, 188.
——————————, in nervous affections, 198.
Vanzetti, fibrous tumour of parotid, 223.
Varicocele, new operation for, 223.
Varicose tumour of neck of uterus obstructing parturition, 506.
Venous pulse, nature and causes of, 449.
Vermont Asylum for Insane, Eighth Annual Report, 155.
Vidal, new operation for varicocele, 223.

W

Warburton, feigned diseases in Egypt, 514.
Warren on strangulated hernia, 13.
Watson, danger of opium as a remedy in strangulated hernia, 257.
———, bleeding hemorrhoids, 524.
Watt, mortality of different ages in certain diseases, 515.
Wattmann on accidental introduction of air in veins, 170.
Western Penitentiary of Pennsylvania, 525.
Wheeler, extirpation of scirrhous parotid gland, 520.
Wiesel, ununited fracture treated by acupuncture, 219.
Wilde, discharges from the ears, 225.
Willebrand, treatment of syphilis by tartar emetic, 221.
Williams and Clymer on diseases of the respiratory organs, 413.
Williams's Medical Biography, 438.
Woodward's Report of State Lunatic Asylum at Worcester, 423.
Worcester, State Lunatic Asylum at, Report, 423.
Worms, intestinal, symptoms of pleurisy produced by, 200.
Wurdemann, treatment of yellow-fever, 51.

Y

Yellow-fever at Woodville, 258.
—————, Nott on, 277.
—————, Wurdemann on treatment of, 51.

Z

Zeis, surgical treatises, 163.

THE

AMERICAN JOURNAL

OF THE

MEDICAL SCIENCES.

EDITED BY

ISAAC HAYS, M.D.,
SURGEON TO WILLS HOSPITAL,
PHYSICIAN TO THE PHILADELPHIA ORPHAN ASYLUM,
MEMBER OF THE AMERICAN PHILOSOPHICAL SOCIETY, OF THE
ACADEMY OF NATURAL SCIENCES OF PHILADELPHIA,
&c. &c. &c.

NEW SERIES.

VOL. X.

QUÆ PROSUNT OMNIBUS.

PHILADELPHIA:
LEA & BLANCHARD.
LONDON:
WILEY & PUTNAM, AND JOHN MILLER.
....
1845.